

Application Data Sheet

**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Title::	FOLD-DOWN CHUTE FOR SNOW BLOWER
Attorney Docket Number::	M297.12-0298
Request for Non-Publication?::	Yes
Suggested Drawing Figure::	
Total Drawing Sheets::	4
Small Entity?::	No
Petition included?::	No
Petition Type::	

**Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Given Name::	John G.
Family Name::	Liebl
Name Suffix::	
City of Residence::	Atwater
State or Province of Residence::	MN
Country of Residence::	US
Street of Mailing address::	14590 Breezy Point Rd.
City of Mailing address::	Atwater
State of Province of mailing address::	MN
Country of mailing address::	
Postal or Zip Code::	56209

**Comments:** Repeat the above for each inventor

### **Correspondence Information**

Name:: Nickolas E. Westman  
Street of mailing address:: Westman, Champlin & Kelly  
900 Second Avenue South, Suite 1600  
City of mailing address:: Minneapolis  
State or Province of mailing address:: MN  
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Phone number:: 612/334-3222  
Fax number:: 612/334-3212  
E-Mail address:: nwestman@wck.com

### **Representative Information**

Representative Designation::	Registration Number::	Representative Name:
Primary	20147	Nickolas E. Westman
Primary	34797	Judson K. Champlin
Primary	34847	Joseph R. Kelly
Primary	36188	Steven M. Koehler
Primary	34557	David D. Brush
Primary	38354	John D. Veldhuis-Kroeze
Primary	39758	Theodore M. Magee
Primary	35612	Deirdre Megley Kvale
Primary	42413	Christopher R. Christenson
Primary	41885	Brian D. Kaul
Primary	45466	Nathan M. Rau
Primary	45844	Christopher L. Holt
Primary	45956	Alan G. Rego
Primary	48516	Todd R. Fronek
Primary	49027	Linda P. Ji
Primary	53675	Leanne R. Taveggia
Primary	24383	Robert M. Angus

Primary	32015	David C. Bohn

### Domestic Priority Information

Application:::	Continuity Type:::	Parent Application:::	Parent Filing Date:::
This application			MM/DD/YY

### Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
		MM/DD/YY	Yes or No

### Assignee Information

Assignee name:: Clark Equipment Company  
Street of mailing address:: 200 Chestnut Ridge Road,  
P.O. Box 8737  
City of mailing address:: Woodcliff Lake  
State or Province of mailing address:: NJ  
Country of mailing address::  
Postal or Zip Code of mailing address:: 07675-8738